

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 2
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) The 2016 Committee			FEC IDENTIFICATION NUMBER ▼ C C00569905		
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee DIRECT ANSWER			Date of Public Distribution/Dissemination 08 / 05 / 2015		
Mailing Address 414 SMOKEY HOLOW ROAD			Amount 21593.49		
City CAPON BRIDGE	State WV	Zip Code 26711-2401	Transaction ID : SE24.1209		
Purpose of Expenditure FULLFILLMENT ITEMS - CLOTHING & MAGNETS		Category/Type 004	Date of Disbursement or Obligation 08 / 05 / 2015		
Name of Federal Candidate DR. BEN CARSON			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 1663857.01			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee PLAZA PRINTERS			Date of Public Distribution/Dissemination 08 / 05 / 2015		
Mailing Address 6762 DOUGLAS AVENUE			Amount 720.80		
City URBANDALE	State IA	Zip Code 50322-3316	Transaction ID : SE24.1210		
Purpose of Expenditure SIGNAGE		Category/Type 004	Date of Disbursement or Obligation 08 / 05 / 2015		
Name of Federal Candidate DR. BEN CARSON			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 1664577.81			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			22314.29		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Robert Frank</u> <div style="text-align: right;">[Electronically Filed]</div>			Date 01 / 12 / 2016		